



Common Library Reports

ACCOUNTING/BUDGET/PAYROLL REPORTS

REPORT NAME	DESCRIPTION	PAGE NUMBER
COM021	Report that displays state share costs and administrative costs for the following benefits: health, dental, vision, life, FlexElect Cash, flex employer paid administrative fee, retirement, Social Security and Medicare.	COM-12
COM024	Report that identifies total wages paid from blanket funds for a specified pay period. Included are overtime and temporary help payments.	COM-14
COM025	Report that identifies retirement and Social Security/Medicare expenditures.	COM-15
COM026	Report that identifies state expenditures for each type of payment and for the following benefits: health, dental, vision, life, FlexElect Cash, and flex employer paid administrative fee.	COM-16

EQUAL EMPLOYMENT OPPORTUNITY REPORTS

REPORT NAME	DESCRIPTION	PAGE NUMBER
COM011	Report that counts employees by ethnicity and class title within an agency and unit. Two percentages are produced based on these counts, one for the unit and the other for the department.	COM-8
COM017	Report that compares your department's overall ethnicity composition with the labor force parity you provide.	COM-9
COM020	Report that compares your department's overall ethnicity and gender composition with the statewide labor force parity you provide.	COM-11
COM028	Report that provides an employee count and calculates the average monthly salary and the average annual salary first for the department as a whole, and second by gender which includes the PLP amount.	COM-18
COM028A	Report that provides an employee count and calculates the average monthly salary and the average annual salary first for the department as a whole, and second by gender. This report does not add in the PLP amount.	COM-18A
COM029	Report that produces an ethnicity and gender breakdown of employee counts by class title and calculates percentages based on the total count of active employees in each class.	COM-19

INTERMITTENT HOURS TRACKING REPORTS

REPORT NAME	DESCRIPTION	PAGE NUMBER
INT001	Report that identifies Intermittent employees eligible for health/dental benefits based on the specified control period.	INT-1
INT001A	Report that identifies intermittent employees eligible for health/dental benefits based on the specified control period. Includes indicator of employee enrollment in health and dental.	INT-1A
INT002	Report that identifies Intermittent employees currently enrolled in health/dental benefits that have become ineligible based on the specified control period.	INT-2
INT002A	Report that identifies intermittent employees, whether currently enrolled or not enrolled in health/dental benefits, that have become ineligible based on the specified control period. Includes indicator of employee enrollment in health and dental.	INT-2A
INT003*	Report that identifies Intermittent employees reaching the end of their vacation or personal holiday waiting period.	INT-3
INT003A*	Report that identifies Intermittent employees with 960 hours or more towards their vacation/personal holiday waiting period. Based on the Leave Benefit Id 'WP' (PH/VA Waiting Period).	INT-3A
INT004	Report that identifies Intermittent employees not currently enrolled in a retirement plan that have become eligible.	INT-4
INT004A*	Report that identifies Intermittent employees not currently enrolled in a retirement plan that have become eligible. Based on the Leave Benefit Id 'RT' (Retirement).	INT-4A
INT005	Report that identifies total hours worked and wages paid to Intermittents (roll code 3, 4, 6, and 7) for a specified pay period.	INT-5
INT006	Report that identifies Intermittent employees reaching their 1500 hour maximum (worked 1200 hours or more) for the specified year.	INT-6
INT006A*	Report that identifies Intermittent employees reaching their maximum hours to work. Based on the Leave Benefit Id 'MX' (Maximum Hours Worked).	INT-6A
INT007*	Report that identifies actual time worked (ATW) employees who have worked more than 150 days toward the 194 day maximum, based on the Leave Benefit ID 'DL' (Days Limited).	INT-7
INT008*	Report that identifies Intermittent employees with probation reports due and indicates when the report is to be completed. Based on the Leave Benefit ID 'HP' (Hours Probation).	INT-8

INT009*	Report that identifies Intermittent employees who have reached the end of their 960 hours towards a SISA increase or the 1920 hours towards the MSA increase. Based on the Leave Benefit Id 'MA' or 'SA' (MSA/SISA).	INT-9
INT010*	Report that identifies Intermittent employees who have reached the end of their alternate range of 6 or 12 months. Based on the Leave Benefit Id 'AC' or 'AY' (Alt Range Change 960/1920).	INT-10
INT011*	Report that lists Intermittent employees with their Anniversary Date, Range, Account Code, Leave benefits and balances.	INT-11

*Use of these reports requires participation in the California Leave Accounting System

(CLAS)LABOR RELATIONS REPORTS

REPORT NAME	DESCRIPTION	PAGE NUMBER
COM023	Report that identifies employees who had a change in their collective bargaining designation.	COM-13

LEAVE ACCOUNTING REPORTS

REPORT NAME	DESCRIPTION	PAGE NUMBER
LEAVE001*	Report that identifies employees on Direct Deposit with less than 40 hours combined balance of Annual Leave, Vacation, CTO, Personal Leave and Excess Hours AND a Sick Leave balance of less than 20 hours.	LV-1
LEAVE004*	Report that identifies employees projected to exceed the vacation or annual leave maximum based on an employee's CBID. Note: This report cannot project changes in leave accrual rates.	LV-2
LEAVE006*	Report that identifies employees with a PLP balance and the dollar equivalent to cash out.	LV-3
LEAVE06A*	Report that identifies employees with a PL (PLP) and/or LD (2003 PLP) balances and the dollar equivalent to cash out.	LV-3A
LEAVE007*	Report that identifies employees who have state service data, but do not have leave benefit data. This report should be run periodically to determine if CLAS needs to be corrected.	LV-4
LEAVE009*	Report that provides the total number of CTO hours worked, and the total overtime hours worked and paid for a specified pay period.	LV-5
LEAVE010*	Report that provides the count of employees who used sick leave, and the total amount of sick leave hours used in a specified leave period. Report includes hours for leave	LV-6

	benefits used in lieu of sick leave (leave transaction codes: 04, 71).	
LEAVE011*	Report that provides the number of hours worked and used, and the average number of employees for one calendar year for California Occupational Safety and Health Administration (CalOSHA). This report is similar to COM027, but uses the THLAS Leave file to subtract all hours used to get the final "TOTAL HOURS".	LV-7

* Use of these reports requires participation in the California Leave Accounting System (CLAS)

PERSONNEL REPORTS

REPORT NAME	DESCRIPTION	PAGE NUMBER
COM001	Report that creates mailing labels for active employees.	COM-1
COM003	Report that identifies employees with missing or erroneous information: employee name, address, birthdate, ethnicity, or gender. This report can be run periodically to determine if PARs and/or EARs need to be corrected.	COM-2
COM005	Report that identifies employees with probation reports due and indicates whether it's the 1st, 2nd, or 3rd probation report. Report is sorted by position number.	COM-3
COM007	Report that identifies employees with probation reports due and indicates whether it's the 1st, 2nd, or 3rd probation report. Report page breaks on agency code.	COM-4
COM008	Report that creates labels for employees with probation reports due.	COM-5
COM009	Report that identifies employees with Individual Development Plans (IDP) due.	COM-6
COM010	Report that identifies employees with probation reports due and indicates whether it's the 1st, 2nd, or 3rd probation report. Report is sorted by agency, unit and probation report due date.	COM-7
COM018	Report that identifies employees new to your department during the period specified. Headquarters departments (i.e., DMH, DDS, DMH, Education, and Corrections) use COM034.	COM-10
COM027	Report that provides the number of hours worked and average number of employees for one calendar year to the California Occupational Safety and Health Administration (CalOSHA). If your department participates in CLAS, you should use Common Library Report LEAVE011, which uses the THLAS leave file.	COM-17
COM032	Report that generates labels to be placed at the top of a standard Individual Development Plan (IDP) form (Std. 637).	COM-20
COM033	Report that identifies employees on Direct Deposit during a specified pay period.	COM-21
COM034	Report that identifies employees new to headquarters agencies (i.e., CYA, DDS, DMH, and Corrections) during a specified period.	COM-22
COM035	Report that lists in Alpha order all Active and Temporary Separated employees.	COM-23
COM036	Report that identifies quarterly split class designation.	COM-24
COM037	Report that identifies quarterly confidential designation.	COM-25
PERS001*	Report that identifies employees approaching 20, 25, or 40 years of state service within the next 12 months.	PERS-1
PERS002*	Report that reflects employees whose balance is 240 or greater and have not been cancelled from the VPLP program.	PERS-2

* Use of these reports requires participation in the California Leave Accounting System (CLAS)

POSITION INVENTORY REPORTS**

REPORT NAME	DESCRIPTION	PAGE NUMBER
POS001	Report that lists all established or re-classed positions displaying Full Time Equivalency (FTE) and includes the name and time base of the employee occupying the position.	POS-1
POS002	Report that lists all established or re-classed positions displaying Full Time Equivalency (FTE) sorted by Class Title. It includes the name and time base of the employee occupying the position.	POS-2
POS003	Report that provides a summary of established filled/vacant positions sorted by Class Title.	POS-3
POS004	Report that provides a department summary of established filled/vacant positions sorted by Class Code.	POS-4
POS005	Report that displays positions where expenditures have not been charged to the listed positions for 6 consecutive months or more in a fiscal year.	POS-5

COM001

Report that creates mailing labels for active employees.

MICHAEL ACKERS 9888 EMPEROR AVENUE ARCADIA, CA 91116
H A ACKERSON 848 HARVARD BEND WOODLAND, CA 95695
CHRISTOPHER R ADAME 5588 53RD AVE SACRAMENTO, CA 95814
MANUEL C ARRELLANO 1948 RIVERSIDE BLVD NEWCASTLE, CA 95689

COM003

Report that identifies employees with missing or erroneous information: employee name, address, birthdate, ethnicity or gender. This report can be run periodically to determine if PARs and/or EARs need to be corrected.

PAGE 1

EMPLOYEES WITH MISSING OR ERRONEOUS DATA
 PLEASE CORRECT EAR/PAR INFORMATION
 DATE: 05/02/2000 DATA AS OF: 04/28/2000

POSITION NO	SSN	NAME	ETHNIC	X	BIRTH	STREET ADDRESS	CITY STATE	STATUS
-----	---	----	ITY	-	-----	-----	-----	-----
998-100-1579-002	xxx-xx-xxxx	CRABTREE, SUSAN R		F	1938/03/16	1774 DEVON ST	SAN DIEGO CA	ACTIVE
998-100-1728-051	xxx-xx-xxxx	MARTINEZ, PAUL C		M	1943/12/06	1499 LEROY AVE	BERKELEY, CA	ACTIVE
998-100-1728-092	xxx-xx-xxxx	GORDON, GEORGE		M	1952/11/13	1998 GOLDEN WY	AUBURN, CA	ACTIVE
998-100-1771-001	xxx-xx-xxxx	FONG, ROBERT S			1931/02/01	7777 LUDING DR.	LA JOLLA, CA	ACTIVE
998-110-1379-002	xxx-xx-xxxx	FOGERTY, JOHN	9	M	1926/04/24			PERM SEP

NOTE: ETHNICITY CODE 9 IS A CALIFORNIA STATE UNIVERSITY DESIGNATION
 FOR MEXICAN-AMERICAN

COM005

Report that identifies employees with probation reports due and indicates whether it's the 1st, 2nd, or 3rd probation report. Report is sorted by position number and can be run monthly.

PAGE 1

PROBATION REPORT
FOR THE MONTH OF APRIL

POSITION NUMBER -----	PROB DUE DATE ----	STATUS -----	PROB END DATE ----	SSN ---	NAME -----
999-011-5393-001	04/12/2000	1ST	08/12/2000	xxx-xx-xxxx	COOK, KATHLEEN
999-012-1301-001	04/14/1999	2ND	08/14/2000	xxx-xx-xxxx	ADAMS, ANNE
999-012-1379-002	04/06/1999	3RD	04/06/2000	xxx-xx-xxxx	GREEN, GARY

COM007

Report that identifies employees with probation reports due and indicates whether it's the 1st, 2nd, or 3rd probation report. Report page breaks on agency code.

PAGE 1

PROBATION REPORT
FOR THE MONTH OF APRIL

POSITION NUMBER -----	PROB DUE DATE -----	STATUS -----	PROB END DATE -----	SSN ---	NAME -----
998-011-5393-001	04/12/2000	1ST	08/12/2000	xxx-xx-xxxx	CARNIE, KATHLEEN
998-012-1301-001	04/14/2000	2ND	08/14/2000	xxx-xx-xxxx	JEWEL, ANNE
998-012-1379-002	04/06/2000	3RD	04/06/2000	xxx-xx-xxxx	LOUDEN, GARY

COM008

Report that creates labels for employees with probation reports due.

GUZMAN, MARIANNE	xxx-xx-xxxx
PROB DUE: 04/03/2000	1ST
CLAIM AUDITOR	777-313-1771-002
PROB END DATE: 08/03/2000	
STATE CONTROLLERS OFFICE	
WILLIAMS, RICHARD R	xxx-xx-xxxx
PROB DUE: 04/01/2000	3RD
ST SVS MANAGE AUD	777-313-5841-212
PROB END DATE: 04/01/2000	
STATE CONTROLLERS OFFICE	
SHAFFER, KAITLIN L	xxx-xx-xxxx
PROB DUE: 04/06/2000	2ND
AS PROG ANALYST/SP	777-444-1579-925
PROB END DATE: 06/06/2000	
STATE CONTROLLERS OFFICE	

COM009

Report that identifies employees with Individual Development Plans (IDP) due.

PAGE 1

LIST OF EMPLOYEES DUE AUGUST IDPS
DATA AS OF: 04/28/2000

POSITION NUMBER -----	NAME ----	CLASS TITLE -----
998-100-1579-002	MCCOY II, DENNIS H	AS PROG ANALYST/SP
998-100-1728-051	KING, LAWRENCE J	EXEC A
998-100-1728-092	SMITH, MERIDETH	EXEC A
998-100-1771-001	TUTTLE, SUSAN R	CLAIM AUDITOR

PAGE 1

LIST OF EMPLOYEES DUE AUGUST IDPS
DATA AS OF: 04/28/2000

POSITION NUMBER -----	NAME ----	CLASS TITLE -----
998-110-1379-002	GARCIA, JOHN	OFF ASST/TYP
998-110-5237-004	KERR, AMANDA C	LEGAL ANALYST

COM010

Report that identifies employees with probation reports due and indicates whether it's the 1st, 2nd, or 3rd probation report. Report is sorted by agency, unit and probation report due date.

PAGE 1

PROBATION REPORT FOR APRIL

POSITION NUMBER	PROB DUE DATE	STATUS	PROB END DATE	SSN	NAME	CLASS TITLE
-----	----	-----	----	---	----	-----
998-111-1579-003	04/11/2000	1ST	08/11/2000	xxx-xx-xxxx	COOK, KATHY	AS PROG ANLYST/SP
998-111-1771-084	04/17/2000	1ST	08/17/2000	xxx-xx-xxxx	ANDREWS, ANN	CLAIM AUDITOR
998-111-1728-009	04/29/2000	3RD	04/29/2000	xxx-xx-xxxx	GREEN, GARY	EXEC A

PAGE 1

PROBATION REPORT FOR APRIL

POSITION NUMBER	PROB DUE DATE	STATUS	PROB END DATE	SSN	NAME	CLASS TITLE
-----	----	-----	----	---	----	-----
998-113-1138-202	04/03/2000	2ND	06/03/2000	xxx-xx-xxxx	MCCARTHY, WILMA	OFF TECH (TYPING)
998-113-5197-001	04/17/2000	3RD	04/17/2000	xxx-xx-xxxx	NGUYEN, DAVID S	TRAINING OFFICER I
998-113-1503-006	04/27/2000	1ST	08/27/2000	xxx-xx-xxxx	FILLMORE, JAMES D	MAT & STORES SP

COM011

Report that counts employees by ethnicity and class title within an agency and unit. Two percentages are produced based on these counts, one for the unit and the other for the department.

PAGE 1

ETHNICITY BREAKDOWN BY AGENCY AND UNIT FOR ACTIVE EMPLOYEES
AS OF: 04/28/2000

AGENCY	UNIT	ETHNICITY	CLASS TITLE	SSN COUNT	UNIT PERCENT	DEPT PERCENT
-----	----	-----	-----	-----	-----	-----
978	100	BLACK	GRAD STUDENT ASST	1	100.00	.07
	101	BLACK	ASST EXAM PROCTOR	1	5.00	.08
		HISPANIC	ASO GOVRL PROG ANL	1	5.00	.07
			BLDG MAINT WORKER	1	5.00	.07
			LABORER	1	5.00	.07
			STUDENT ASSISTANT	1	5.00	.07
			SUP PROPERTY AGENT	3	15.00	.22
		WHITE	ASO GOVRL PROG ANL	2	10.00	.15

NOTE: BECAUSE THIS REPORT IS BROKEN DOWN BY AGENCY, UNIT AND CLASS DUPLICATE COUNTS WILL OCCUR FOR ACTIVE EMPLOYEES WITH POSITIONS IN MORE THAN ONE POSITION NUMBER WITHIN THE SAME AGENCY.

CONFIDENTIAL INFORMATION

GENERATED ON 05/02/2000

COM017

Report that compares your department's overall ethnicity composition with the labor force parity your provide.

PAGE 1

COMPARISON OF DEPARTMENTAL ETHNICITY BREAKDOWN
WITH LABOR FORCE PARITY
DATA AS OF: 04/28/2000

ETHNICITY GROUP	LABOR FORCE PARITY	#	%	DIFF %
-----	-----	---	---	----
AMER INDIAN	.70	1	.14	-.56
ASIAN	3.60	72	10.29	6.69
BLACK	6.60	77	11.00	4.40
FILIPINO	1.60	23	3.29	1.69
HISPANIC	10.20	80	11.43	-5.77
OTHER	.50	8	1.14	.64
PACIFIC ISL	.30	3	.43	.13
WHITE	69.80	436	62.29	-7.51

CONFIDENTIAL INFORMATION
GENERATED ON 05/02/2000

COM018

Report that identifies employees new to your department during the period specified.
Headquarters departments (i.e., DMH, DDS, Corrections) use COM034.

PAGE 1

EMPLOYEES NEW TO THE DEPARTMENT
FROM 07/01/1999 TO 06/30/2000
DATA AS OF: 07/02/2000

POSITION NUMBER -----	SSN ---	TRANS CODE -----	EFF DATE -----	EMPLOYEE -----
555-111-2323-001	xxx-xx-xxxx	A01	09/01/1999	BANKS, MARTHA C
555-111-2324-006	xxx-xx-xxxx	A01	08/15/1999	WALTON, JONATHON
555-122-4455-101	xxx-xx-xxxx	A02	06/01/2000	VASQUEZ, PAUL R
555-122-5556-009	xxx-xx-xxxx	A01	12/01/1999	WEAVER, SUSAN D
555-223-2323-203	xxx-xx-xxxx xxx-xx-xxxx	A04	10/15/1999	KELLY, JOHN F
555-400-4455-091		A02	12/15/1999	SCHULTZ, MICHELLE
555-400-6324-222	xxx-xx-xxxx	A01	05/01/2000	SMITH, DERRICK D
556-222-3454-074	xxx-xx-xxxx	A01	10/01/1999	CASTILLO, CARLA C

COM020

Report that compares your department's overall ethnicity and gender composition with the statewide labor force parity you provide.

PAGE 1

COMPARISON OF DEPARTMENTAL ETHNICITY AND GENDER
BREAKDOWN
WITH LABOR FORCE PARITY
DATA AS OF: 04/28/2000

ETHNICITY GROUP	GENDER	LABOR FORCE PARITY	#	%	DIFF %
-----	-----	-----	---	---	----
AMER INDIAN	F	.30	2	.14	-.16
	M	.40	2	.14	-.26
ASIAN	F	1.70	96	6.90	5.20
	M	1.90	74	5.32	3.42
BLACK	F	3.20	92	6.61	3.41
	M	3.40	33	2.37	-1.03
FILIPINO	F	.80	25	1.80	1.00
	M	.80	20	1.44	.64
HISPANIC	F	6.80	125	8.98	2.18
	M	10.40	58	4.17	-6.23
OTHER	F	.10	14	1.01	.91
	M	.10	10	.72	.62
PACIFIC ISL	F	.10	3	.22	.12
	M	.20	1	.07	-.13
WHITE	F	29.80	475	34.12	4.32
	M	40.00	362	26.01	-13.99

CONFIDENTIAL INFORMATION
GENERATED ON 05/02/2000

COM021

Report that displays state share costs and administrative costs for the following benefits:
health, dental, vision, life, FlexElect Cash, flex employer paid administrative fee, retirement,
Social Security and Medicare.

PAGE 1

03/2000 PAYROLL SUMMARY WITH BENEFIT BREAKDOWN
FOR RETIREMENT TIER I
DATA AS OF: 04/28/2000

	STATE SHARE HEALTH -----	STATE SHARE DENTAL -----	STATE SHARE VISION -----	STATE SHARE FLEX CASH -----	STATE SHARE FLEX ER PAID FEE -----	STATE SHARE LIFE -----	STATE SHARE RETIRE -----	STATE SHARE SOC SEC -----	STATE SHARE MEDICARE -----	TOTAL ADMIN COST -----	TOTAL SS AND ADMIN -----
001-222	1307-091	COX, SANDRA B									
	153.10	13.91	9.33	.00	.00	.00	324.37	.00	.00	.77	\$501.48
	2943-004	LEMMON, BRIAN D									
	376.87	63.99	9.33	.00	.00	.00	470.94	240.55	56.26	1.88	\$1,219.82
	7500-003	O'CONNOR, TODD B									
	402.61	76.42	9.33	.00	.00	12.50	690.03	343.15	80.26	2.01	\$1,616.31
001-223	1148-007	AMADA, JANET O									
	.00	54.83	9.33	128.00	.00	6.48	324.77	173.40	40.56	.00	\$737.37
	1379-055	JENNINGS, LAWRENCE D									
	376.87	31.01	9.33	.00	.00	.00	190.36	126.29	29.54	1.88	\$765.28
	5758-009	PALERMO, JAMES P									
	384.80	28.39	9.33	.00	.00	.00	466.69	309.63	72.41	1.92	\$1,273.17

COM023

Report that identifies employees who had a change in their collective bargaining designation.

PAGE 1

EMPLOYEES WHO HAD A CHANGE IN BARGAINING DESIGNATION
FROM 07/01/1999 TO 06/30/2000
DATA AS OF: 07/14/2000

NAME	SSN	DESIG NATION	EFF DATE	TRANS CODE	POSITION NUMBER
----	---	-----	----	-----	-----
ADAMSON, STANLEY	xxx-xx-xxxx	S	12/31/1999	A01	444-121-3804-006
		R	12/02/1999	MSA	444-121-3736-009
		R	07/01/1999	355	444-121-3736-009
		R	12/01/1998	A01	444-121-3736-009

HAMILTON, DENISE R	xxx-xx-xxxx	C	03/02/2000	MSA	444-121-5393-025
		C	10/31/1999	120	444-121-5393-025
		R	10/01/1999	405	444-124-5393-022
		R	03/01/1999	A01	444-124-5393-022
		R	06/01/1998	MSA	444-124-5157-022

PARDUCCI, MAXINE C	xxx-xx-xxxx	R	06/01/2000	120	444-663-3875-029
		R	10/01/1999	A02	444-663-3875-043
		S	10/01/1999	A03	444-663-3804-002
		S	06/14/1999	S49	444-663-3804-002
		S	01/01/1999	120	444-663-3804-002

COM024

Report that identifies total wages paid from blanket funds for a specified pay period.

PAGE 1

BLANKET EXPENDITURE REPORT
(INCLUDES O.T. AND TEMP. HELP)
FOR MARCH, 2000
DATA AS OF: 04/28/2000

AGY	SERIAL NUMBER	UNIT	NAME	GROSS PAY	DAYS PAID	HOURS PAID
---	-----	----	----	-----	----	-----
999	901	510	ADAMS, JAMES C	\$379.92	0	12.00
		530	HILL, JAVIER	\$3,516.96	20	13.00
		540	GARVEY, RONALD	\$636.90	0	22.00
			JONES, JUAN M	\$1,155.20	0	38.00
*TOTAL BLANKET 901				\$5,688.98	20	85.00

COM025

Report that identifies retirement and social security/medicare expenditures by quarter.

PAGE 1

STATE SHARE EXPENDITURES
FOR RETIREMENT AND SOCIAL SECURITY/MEDICARE
BY QUARTER

FISCAL YEAR 1999/2000

	RETIREMENT -----	SOCIAL SECURITY/ MEDICARE -----	TOTAL -----
FIRST	\$1,355,237.60	\$157,101.60	\$1,512,339.20
SECOND	\$1,244,820.62	\$158,439.69	\$1,403,260.31
THIRD	\$1,394,208.71	\$160,723.75	\$1,554,932.46
FOURTH	\$984,388.31	\$126,432.87	\$1,110,821.18
TOTAL	\$4,978,655.24	\$602,697.91	\$5,581,353.15

DATA AS OF: 07/14/2000

COM026

Report that identifies state expenditures for each type of payment and for the following benefits: health, dental, vision, life, FlexElect Cash, and flex employer paid administrative fee.

PAGE 1

GROSS PAYMENTS AND STATE SHARE AMOUNTS
FOR 04/2000 TO 06/2000

PAY PERIOD	DEDUCTION/ PAYMENTS	STATE SHARE BENEFITS	TOTAL PAYMENTS	STATE SHARE RETR	STATE SHARE SOC SEC	STATE SHARE MEDICARE	TOTAL
-----	-----	-----	-----	-----	-----	-----	-----
04/2000	AWARD	\$.00	\$50.00	\$.00	\$3.10	\$.73	53.83
	DED ADJ REF	\$.00	\$.00	\$.00	\$.00	\$.00	.00
	DENTAL	\$51,286.51	\$.00	\$.00	\$.00	\$.00	51,286.51
	DSBLTY SUPP	\$.00	\$3,009.34	\$266.68	\$190.09	\$44.46	3,510.57
	FLEX CASH	\$16,536.00	\$.00	\$.00	\$.00	\$.00	16,536.00
	HEALTH	\$340,588.52	\$.00	\$.00	\$.00	\$.00	340,588.52
	IDL FULL	\$.00	\$8,032.43	\$1,041.91	\$.00	\$.00	9,074.37
	IDL-2/3	\$.00	\$9,368.87	\$1,177.54	\$.00	\$.00	10,546.41
	L/S OT	\$.00	\$8,628.66	\$.00	\$459.48	\$107.46	9,195.60
	L/S VAC	\$.00	\$42,458.19	\$.00	\$2,255.99	\$528.92	45,243.10
	LIFE INS	\$707.28	\$.00	\$.00	\$.00	\$.00	707.28
	MISC	\$.00	\$28,980.65	\$3,161.81	\$1,780.11	\$416.06	34,338.63
	NDI	\$.00	\$7,937.99	\$.00	\$263.62	\$61.66	8,263.27
	OVERTIME	\$.00	\$85,468.69	\$.00	\$4,997.88	\$1,190.39	91,656.96
	PREMIUM PAY	\$.00	\$3,053.99	\$3,053.99	\$181.28	\$42.56	3,455.51
	REGULAR	\$.00	\$3,729,597.93	\$421,921.65	\$223,634.22	\$53,008.67	4,428,162.47
	SHIFT	\$.00	\$2,273.53	\$204.86	\$108.81	\$32.44	2,619.64
	VISION	\$10,953.42	\$.00	\$.00	\$.00	\$.00	10,953.42
TOTAL 04/2000		\$420,071.73	\$3,928,860.27	\$427,952.16	\$233,874.58	\$55,433.35	5,066,192.09

COM027

Report that provides the number of hours worked and average number of employees for one calendar year to the California Occupational Safety and Health Administration (CalOSHA). If your department participates in CLAS, you should use Common Library Report LEAVE011, which uses the THLAS leave file.

PAGE 1

CAL OSHA REPORT FOR 1999

PAY PERIOD -----	SSN COUNT -----	HOURS WORKED* -----
1999/01	1,068	173,326
1999/02	1,117	166,226
1999/03	1,106	173,628
1999/04	1,106	165,797
1999/05	1,109	173,146
1999/06	1,003	172,765
1999/07	1,077	173,169
1999/08	1,057	173,008
1999/09	1,050	163,891
1999/10	1,053	172,559
1999/11	1,030	173,865
1999/12	1,028	172,499
TOTAL	12,904	2,053,879

** AVE_EMP 1,075

* SICK LEAVE, VACATION AND HOLIDAY HOURS
MUST BE SUBTRACTED FROM TOTAL HOURS WORKED

** AVE_EMP IS THE AVERAGE NUMBER OF
EMPLOYEES PAID FROM 01/1999 THRU 12/1999
FOR REGULAR PAY ONLY

COM028

Report that provides an employee count and calculates the average monthly salary and the average annual salary first for the department as a whole, and second by gender which includes the PLP amount.

PAGE 1

AVERAGE MONTHLY/ANNUAL SALARY TOTAL
INCLUDING PLP AMOUNT
FOR ACTIVE AND TEMPORARILY SEPARATED EMPLOYEES
DATA AS OF: 05/21/2004

EMPL COUNT	AVERAGE MONTHLY SALARY	AVERAGE ANNUAL SALARY	GENDER	EMPL COUNT	AVERAGE MONTHLY SALARY	AVERAGE ANNUAL SALARY
-----	-----	-----	-----	-----	-----	-----
1491	\$4,615.69	\$35,388.36	FEMALE	464	\$4,373.05	\$48,876.71
			MALE	1027	\$4,872.29	\$58,467.52

COM028A

Report that provides an employee count and calculates the average monthly salary and the average annual salary first for the department as a whole, and second by gender. This report does not add in the PLP amount.

PAGE 1

AVERAGE MONTHLY/ANNUAL SALARY TOTAL
EXCLUDING PLP AMOUNT
FOR ACTIVE AND TEMPORARILY SEPARATED EMPLOYEES
DATA AS OF: 05/21/2004

EMPL COUNT	AVERAGE MONTHLY SALARY	AVERAGE ANNUAL SALARY	GENDER	EMPL COUNT	AVERAGE MONTHLY SALARY	AVERAGE ANNUAL SALARY
-----	-----	-----	-----	-----	-----	-----
1491	\$4,615.69	\$35,388.36	FEMALE	464	\$4,373.05	\$48,876.71
			MALE	1027	\$4,872.29	\$58,467.52

COM029

Report that produces an ethnicity and gender breakdown of employee counts by class title and calculates percentages based on the total count of active employees in each class.

PAGE 1

ETHNICITY AND GENDER BREAKDOWN BY CLASS FOR ACTIVE EMPLOYEES
DATA AS OF: 04/14/2000

CLASS TITLE	ETHNICITY	GENDER	EMPLOYEE COUNT	CLASS PERCENT
-----	-----	-----	-----	-----
A INFO SYS AN	FILIPINO	M	1	25.00
	WHITE	F	2	50.00
		M	1	25.00
TOTAL: A INFO SYS AN			4	100.00
ACCOUNTING TECH	HISPANIC	F	1	33.33
		M	1	33.33
	WHITE	M	1	33.33
TOTAL: ACCOUNTING TECH			3	100.00
ASO GOVRL PROG ANL	AMER INDIAN	F	1	5.56
	BLACK	F	2	11.11
		M	1	5.56
	OTHER	F	1	5.56
	WHITE	F	12	66.67
		M	1	5.56
TOTAL: ASO GOVRL PROG ANL			18	100.00

COM032

Report that generates labels to be placed at the top of a standard Individual Development Plan (IDP) form (Std. 637).

INDIVIDUAL DEVELOPMENT PLAN FOR FUTURE JOB PERFORMANCE OF PERMANENT EMPLOYEES GUZMAN, MARIANNE ST SVS MANAGE AUD	08/2000 777-313-5841-212
INDIVIDUAL DEVELOPMENT PLAN FOR FUTURE JOB PERFORMANCE OF PERMANENT EMPLOYEES SHAFFER, KAITLIN L CLAIM AUDITOR	08/2000 777-313-1771-002
INDIVIDUAL DEVELOPMENT PLAN FOR FUTURE JOB PERFORMANCE OF PERMANENT EMPLOYEES WILLIAMS, RICHARD R AS PROG ANALYST/SP	08/2000 777-444-1579-925

COM033

Report that identifies employees on Direct Deposit during a specified pay period.

PAGE 1

EMPLOYEES ON DIRECT DEPOSIT DURING THE 03/2000 PAY PERIOD
DATA AS OF: 04/29/2000 TODAY'S DATE: 05/02/2000

PAYMENT POSITION NUMBER -----	EMPLOYEE NAME -----	SSN ---
555-111-2323-001	DELANEY, DONNA B	xxx-xx-xxxx
555-111-2324-006	ERWIN, ARTHUR D	xxx-xx-xxxx
555-122-4455-101	SNEAD, GREGORY L	xxx-xx-xxxx
555-122-5556-009	GALINDO, MARTHA M	xxx-xx-xxxx
555-223-2323-203	ANDERSON, JEFFREY	xxx-xx-xxxx
555-400-3232-001	CHANG, STEVEN R	xxx-xx-xxxx
555-400-4455-091	WALSH, JEANETTE S	xxx-xx-xxxx
555-400-6324-222	GOLDBLOOM, DAVID T	xxx-xx-xxxx

COM034

Report that identifies employees new to headquarters agencies (i.e., CDCR, DDS, DMH, and Corrections) during a specified period.

PAGE 1

EMPLOYEES NEW TO THE DEPARTMENT
FROM 07/01/1999 TO 06/30/2000
DATA AS OF: 07/07/2000

POSITION NUMBER -----	SSN ---	TRANS CODE -----	EFF DATE ----	EMPLOYEE -----
555-011-2323-002	xxx-xx-xxxx	A01	12/01/1999	TAYLOR, DONNA B
555-011-6543-005	xxx-xx-xxxx	A01	10/01/1999	MORRISON, ARTHUR D
555-013-2555-007	xxx-xx-xxxx	A02	07/01/1999	COFFEE, STEVEN R
555-013-2877-902	xxx-xx-xxxx	A01	05/01/2000	SMITH, GREGORY L
555-013-4652-051	xxx-xx-xxxx	A02	08/15/1999	RIVERA, MARTHA M
556-100-8200-001	xxx-xx-xxxx	A04	06/01/2000	MATHERS, JEFFREY
556-100-8201-005	xxx-xx-xxxx	A01	10/01/1999	WALSH, JEANETTE S

COM035

Report that lists in Alpha order all Active and Temporary Separated employees.
Excluding those employee's who separated due to a Disability Retirement (S71) or Lay-Off (S30) transaction.

PAGE 1

EMPLOYEE ALPHA LISTING OF ALL
ACTIVE AND TEMPORARY SEPARATED EMPLOYEE'S
DATA AS OF: 01/16/2004

NAME	ANNT	CB	CLASS TITLE	SSN NUMBER	POSITION NUMBER	DEPT	TIME	T Y P	T E	TOTAL	EMP	EXPR
----	DATE	ID	-----	-----	-----	----	----	-	-	-----	----	----
APPLE, STACEY MAX		R18	SR PSY TECH	xxx-xx-xxxx	001-008-8231-062	000	FT	P		\$4,613.00		
BROWN, SAM J NONE		R16	PHYSICIAN&SURGN	xxx-xx-xxxx	001-333-7644-021	000	INT	P		\$50.55		
CANDY, VICTOR M 09/04		R04	OFF TECH (TYPING)	xxx-xx-xxxx	001-001-1139-705	000	FT	P		\$2,510.79		
EDWARDS, CINDY MAX		R20	LICENSED VOC NURSE	xxx-xx-xxxx	001-042-8286-015	000	FT	P		\$3,326.07		
FRANK, RANDY K MAX		R17	REGISTERED NURSE	xxx-xx-xxxx	001-012-8165-205	000	FT	P		\$5,138.64		
FRENCH, CECILIA K MAX		R17	REGISTERED NURSE	xxx-xx-xxxx	001-012-8165-003	000	FT	P		\$5,242.64		
HOLMES, MEBRA MAX		R18	PSYCH TECH A	xxx-xx-xxxx	001-042-7425-075	000	FT	P		\$3,186.67		
KING, MATHEW C MAX		R16	PHYSICIAN&SURGN	xxx-xx-xxxx	001-004-7644-016	000	FT	P		\$10,649.90		
LONG, ROBERT A 05/04		R18	PSYCHIATRIC TECH	xxx-xx-xxxx	001-005-8232-017	000	FT	P		\$4,091.67		
MOUSE, MICKEY E MAX		R18	PSYCHIATRIC TECH	xxx-xx-xxxx	001-312-8232-901	000	INT	P		\$23.11		
PRICE, RALPH F MAX		R17	REGISTERED NURSE	xxx-xx-xxxx	001-401-8165-072	000	FT	P		\$5,138.64		
ROBERTS, DENNIS K MAX		R15	BARBERSHOP MANAGER	xxx-xx-xxxx	001-009-2083-001	000	FT	P		\$2,877.50		
SMITH, JACKIE L MAX		R04	OFF ASST/TYP	xxx-xx-xxxx	001-452-1379-009	000	FT	P		\$2,641.00	TEMP	
THOMAS, MATHEW W 09/04		R15	FOOD SVS TECH I	xxx-xx-xxxx	001-700-2194-002	000	FT	P		\$2,746.81		

COM036

Quarterly report that identifies split class designation.

Page 1

SPLIT CLASS DESIGNATION REPORT
DATA AS OF: OCTOBER 19, 2007

AGENCY	RPT UNIT	SCHEM CODE	CLASS TYPE CLASS	CLASS TITLE	EMPLOYEE NAME	SSN	EE CBID
-----	----	-----	-----	-----	-----	---	----
437	500	IK50	3961	SENIOR ARCHITECT	NISHIMOTO, THOMAS L	xxx-xx-xxxx	C04
	544	VM86	8662	PATIENT BEN&IN O I	CHAVEZ, DAVID E	xxx-xx-xxxx	C01
	549	DK40	2258	FOOD SERV SUPVR I	SANDOVAL, DORIS M	xxx-xx-xxxx	C01
	556	PQ60	6520	PAINTER SUPERVISOR	CORRIN, DONNA M	xxx-xx-xxxx	C01
		PT10	6543	PLUMBER SUPERVISOR	BROWN, WILLIAM	xxx-xx-xxxx	C01

COM037

Quarterly report that identifies confidential designation.

Page 1

CONFIDENTIAL DESIGNATION REPORT
DATA AS OF: OCTOBER 19, 2007

AGENCY	UNIT	RPT CODE	SCHEM CLASS	CLASS	EMPLOYEE NAME	SSN	EE
				TYPE CLASS TITLE			CBID
437	500	CD60	1247	EXEC SEC I	JONES, ELIDA G	xxx-xx-xxxx	C04
	543	JY20	5157	STAFF SER AN (GEN)	DAVID, SUSAN D	xxx-xx-xxxx	C01
					FEEDOM, DONNA L	xxx-xx-xxxx	C01

INT001

Report that identifies Intermittent employees eligible for health/dental benefits based on the specified control period.

PAGE 1

INTERMITTENT EMPLOYEES ELIGIBLE
FOR HEALTH/DENTAL BENEFITS
FOR CONTROL PERIOD 07/1999 TO 06/2000

CURRENTLY ENROLLED -----	POSITION NUMBER -----	NAME ----	SSN ---	# HRS 6 MOS -----	# HRS 12 MOS -----
NO	333-011-4300-902	BANKS, MARTHA C	xxx-xx-xxxx	504.00	630.50
	555-011-2323-902	HOLLAND, CURTIS N	xxx-xx-xxxx	519.00	1202.00
		WALTON, JONATHON	xxx-xx-xxxx	692.50	1433.75
	555-011-6543-902	VASQUEZ, PAUL R	xxx-xx-xxxx	492.50	940.00
	555-013-2555-902	WEAVER, SUSAN D	xxx-xx-xxxx	580.00	1763.00
YES	555-011-2877-902	KELLY, JOHN F	xxx-xx-xxxx	658.00	1781.00
	555-011-4652-902	SCHULTZ, MICHELLE	xxx-xx-xxxx	713.00	1445.50
	555-013-7233-902	SMITH, DERRICK D	xxx-xx-xxxx	901.00	1824.00
	556-113-8200-902	CASTILLO, CARLA C	xxx-xx-xxxx	706.25	1399.00
		WHITFIELD, DANIEL T	xxx-xx-xxxx	501.00	1004.50
	555-119-8201-902	RIVERA, MARTHA M	xxx-xx-xxxx	882.75	1699.25
	555-119-8800-902	GOLDSMITH, JEFFREY	xxx-xx-xxxx	745.25	1589.75

NOTE: THIS REPORT DOES NOT CONSIDER HOURS WORKED AT ANOTHER AGENCY
DATA AS OF: 07/14/2000

INT001A

Report that identifies intermittent employees eligible for health/dental benefits based on the specified control period. Includes indicator of employee enrollment in health and dental.

PAGE 1

INTERMITTENT EMPLOYEES ELIGIBLE
FOR HEALTH/DENTAL BENEFITS
FOR CONTROL PERIOD 07/2017 TO 06/2018

POSITION NUMBER -----	NAME -----	SSN ---	# HRS 6 MOS -----	# HRS 12 MOS -----	ENROLLED IN DENTAL* -----	ENROLLED IN HEALTH* -----
555-011-4300-902	CARTWRIGHT, MARTHA C	xxx-xx-xxxx	404.00	630.50	0	1
	MILLER, JONATHON	xxx-xx-xxxx	419.00	802.00	0	1
555-011-6543-902	MARTINEZ, PAUL R	xxx-xx-xxxx	392.50	940.00	1	1
555-013-2555-902	DONNELL, SUSAN D	xxx-xx-xxxx	380.00	563.00	0	0
555-013-2877-902	MOORE, JOHN F	xxx-xx-xxxx	458.00	781.00	2	2
555-013-4652-902	SCHULTZ, MICHELLE	xxx-xx-xxxx	313.00	945.50	0	0
555-019-7233-902	JONES, DERRICK D	xxx-xx-xxxx	401.00	824.00	0	0
	GIBBONS, CARLA C	xxx-xx-xxxx	406.25	499.00	0	0
	RIVERA, MARTHA M	xxx-xx-xxxx	212.00	695.00	1	1
555-100-8800-902	GLOVER, JEFFREY	xxx-xx-xxxx	343.00	870.00	1	1

NOTE: THIS REPORT DOES NOT CONSIDER HOURS EARNED AT ANOTHER AGENCY

*1 OR GREATER=ENROLLED DURING 06/2018 (END OF CONTROL PERIOD)

*0=NOT ENROLLED DURING 06/2018 (END OF CONTROL PERIOD)

DATA AS OF: 07/14/2000

INT002

Report that identifies Intermittent employees currently enrolled in health/dental benefits that have become ineligible based on the specified control period.

PAGE 1

INTERMITTENT EMPLOYEES CURRENTLY ENROLLED IN
HEALTH/DENTAL BENEFITS THAT ARE INELIGIBLE
FOR CONTROL PERIOD 07/1999 TO 06/2000

POSITION NUMBER -----	NAME -----	SSN ---	# HRS 6 MOS -----	# HRS 12 MOS -----
555-011-4300-902	CARTWRIGHT, MARTHA C	xxx-xx-xxxx	404.00	630.50
	MILLER, JONATHON	xxx-xx-xxxx	419.00	802.00
555-011-6543-902	MARTINEZ, PAUL R	xxx-xx-xxxx	392.50	940.00
555-013-2555-902	DONNELL, SUSAN D	xxx-xx-xxxx	380.00	563.00
555-013-2877-902	MOORE, JOHN F	xxx-xx-xxxx	458.00	781.00
555-013-4652-902	SCHULTZ, MICHELLE	xxx-xx-xxxx	313.00	945.50
555-019-7233-902	JONES, DERRICK D	xxx-xx-xxxx	401.00	824.00
	GIBBONS, CARLA C	xxx-xx-xxxx	406.25	499.00
	RIVERA, MARTHA M	xxx-xx-xxxx	212.00	695.00
555-100-8800-902	GLOVER, JEFFREY	xxx-xx-xxxx	343.00	870.00

NOTE: THIS REPORT DOES NOT CONSIDER HOURS EARNED AT ANOTHER AGENCY
DATA AS OF: 07/14/2000

INT002A

Report that identifies intermittent employees, whether currently enrolled or not enrolled in health/dental benefits, that have become ineligible based on the specified control period. Includes indicator of employee enrollment in health and dental.

PAGE 1

INTERMITTENT EMPLOYEES ELIGIBLE
FOR HEALTH/DENTAL BENEFITS
FOR CONTROL PERIOD 07/2017 TO 06/2018

POSITION NUMBER -----	NAME ----	SSN ---	# HRS 6 MOS -----	# HRS 12 MOS -----	ENROLLED IN DENTAL* -----	ENROLLED IN HEALTH* -----
555-011-4300-902	CARTWRIGHT, SARAH C	xxx-xx-xxxx	404.00	630.50	0	1
	MILLER, RALPH	xxx-xx-xxxx	302.00	802.00	0	1
555-011-6543-910	MARTINEZ, PAUL R	xxx-xx-xxxx	.00	.00	0	0
555-013-2555-910	DONNELL, DANIEL D	xxx-xx-xxxx	0.00	.00	0	0
555-013-2877-902	MOORE, JOHN F	xxx-xx-xxxx	458.00	781.00	1	1
555-013-4652-902	SCHULTZ, MICHELLE	xxx-xx-xxxx	.00	.00	0	0
555-019-7233-902	JONES, DERRICK D	xxx-xx-xxxx	.00	.00	0	0
	GIBBONS, CARLA C	xxx-xx-xxxx	.00	.00	0	0
	RIVERA, MARTHA M	xxx-xx-xxxx	.00	.00	0	0
555-100-8800-902	GLOVER, JEFFREY	xxx-xx-xxxx	343.00	870.00	1	1

NOTE: THIS REPORT DOES NOT CONSIDER HOURS EARNED AT ANOTHER AGENCY

*1 OR GREATER=ENROLLED DURING 06/2018 (END OF CONTROL PERIOD)

*0=NOT ENROLLED DURING 06/2018 (END OF CONTROL PERIOD)

DATA AS OF: 07/14/2000

INT003

Report that identifies Intermittent employees reaching the end of their Vacation or Personal Holiday waiting period.

PAGE 1

INTERMITTENT EMPLOYEES APPROACHING THE END
OF THEIR VACATION/PERSONAL HOLIDAY WAITING PERIOD
DATA AS OF: 04/28/2000

POSITION NUMBER -----	CLASSIFICATION -----	EMPLOYEE NAME -----	SSN ---	BENEFIT -----	STATE SERVICE MONTHS -----
555-011-4870-902	STUDENT ASSISTANT	RIVERA, MARTHA M	xxx-xx-xxxx	VA	7
		SCHULTZ, MICHELLE	xxx-xx-xxxx	PH	9
				VA	9
		VASQUEZ, PAUL R	xxx-xx-xxxx	PH	5
		WEAVER, SUSAN D	xxx-xx-xxxx	VA	5
555-012-1123-902	ASSISTANT CLERK	ANDERSON, SARAH B	xxx-xx-xxxx	VA	5
555-013-1441-902	OFF ASST/GEN	BANKS, MARTHA C	xxx-xx-xxxx	VA	12
		CASTILLO, CARLA C	xxx-xx-xxxx	PH	7
		GOLDSMITH, JEFFREY	xxx-xx-xxxx	PH	15
		KELLY, JOHN F	xxx-xx-xxxx	PH	8
		SMITH, DERRICK D	xxx-xx-xxxx	PH	6
555-100-1419-902	KEY DATA OPERATOR	WALTON, JONATHON	xxx-xx-xxxx	VA	16

INT003A

Report that identifies Intermittent employees with 960 hours or more towards their Vacation/Personal Holiday waiting period. Based on the Leave Benefit Id 'WP' (PH/VA Waiting Period).

PAGE 1

INTERMITTENT EMPLOYEES WITH 960 HOURS OR MORE TOWARDS THEIR
VACATION/PERSONAL HOLIDAY WAITING PERIOD USING BENEFIT ID WP
DATA AS OF: 03/17/2006

POSITION NUMBER -----	CLASSIFICATION -----	EMPLOYEE NAME -----	SSN ---	# OF HOURS FOR BENEFIT ID WP -----	STATE SERVICE MONTHS -----	PH/VA WAITING END LEAVE PERIOD -----
555-011-4870-902	STUDENT ASSISTANT	RIVERA, MARTHA M	xxx-xx-xxxx	960.00	7	99/9999
		SCHULTZ, MICHELLE	xxx-xx-xxxx	982.00	9	99/9999
		VASQUEZ, PAUL R	xxx-xx-xxxx	1002.50	5	99/9999
		WEAVER, SUSAN D	xxx-xx-xxxx	993.00	5	99/9999
555-012-1123-902	ASSISTANT CLERK	ANDERSON, SARAH B	xxx-xx-xxxx	975.00	5	99/9999
555-013-1441-902	OFF ASST/GEN	BANKS, MARTHA C	xxx-xx-xxxx	1007.00	12	02/2006
		CASTILLO, CARLA C	xxx-xx-xxxx	960.50	7	99/9999
		GOLDSMITH, JEFFREY	xxx-xx-xxxx	985.00	15	99/9999
		KELLY, JOHN F	xxx-xx-xxxx	1100.00	8	01/2006
		SMITH, DERRICK D	xxx-xx-xxxx	1045.00	6	99/9999
555-100-1419-902	KEY DATA OPERATOR	WALTON, JONATHON	xxx-xx-xxxx	999.00	16	99/9999

INT004

Report that identifies retirement eligible Intermittent employees that are not currently enrolled in a retirement plan.

PAGE 1

INTERMITTENT EMPLOYEES ELIGIBLE FOR RETIREMENT BENEFITS
FOR CONTROL PERIOD 07/1999 TO 06/2000

POSITION NUMBER -----	NAME -----	SSN ---	HOURS PAID -----
555-011-4870-902	TAYLOR, DONNA B	xxx-xx-xxxx	1,120.00
555-012-1123-902	MORRISON, ARTHUR D	xxx-xx-xxxx	1,176.00
555-013-1441-902	MATHERS, JEFFREY	xxx-xx-xxxx	1,833.00
	RIVERA, MARTHA M	xxx-xx-xxxx	1,712.00
	SMITH, GREGORY L	xxx-xx-xxxx	1,360.00
	WALSH, JEANETTE S	xxx-xx-xxxx	1,190.00
555-122-1419-902	COFFEE, STEVEN R	xxx-xx-xxxx	1,902.00

NOTE: THIS REPORT DOES NOT CONSIDER HOURS WORKED AT ANOTHER AGENCY
BUT DOES INCLUDE HOURS THAT WERE PAYMENT TYPE 8 AND WAS TRANSFERRED
TO PAYMENT TYPE 6 DUE TO IDL. (I.E. PAYEARNID 8WK, 8WKN)

INT004A

Report that identifies retirement eligible Intermittent employees that are not currently enrolled in a retirement plan. Based on the Leave Benefit Id 'RT' (Retirement).

PAGE 1

INTERMITTENT EMPLOYEES ELIGIBLE FOR RETIREMENT BENEFITS
DATA AS OF: 03/17/2006

POSITION NUMBER -----	NAME -----	SSN ---	RETIREMENT BALANCE -----
555-011-4870-902	TAYLOR, DONNA B	xxx-xx-xxxx	1120.00
555-012-1123-902	MORRISON, ARTHUR D	xxx-xx-xxxx	1176.00
555-013-1441-902	MATHERS, JEFFREY	xxx-xx-xxxx	1033.50
	RIVERA, MARTHA M	xxx-xx-xxxx	1012.00
	SMITH, GREGORY L	xxx-xx-xxxx	1360.00
	WALSH, JEANETTE S	xxx-xx-xxxx	1190.00
555-122-1419-902	COFFEE, STEVEN R	xxx-xx-xxxx	1902.00

INT005

Report that identifies total hours worked and wages paid to Intermittent employees (roll code 3, 4, 6 or 7) for a specified pay period.

PAGE 1

EXPENDITURE REPORT FOR INTERMITTENT EMPLOYEES
 (INCLUDES ALL PAYMENTS EXCEPT NDI)
 FOR JUNE, 2000 PAY PERIOD
 DATA AS OF: 07/14/2000

PAY POSITION NUMBER	NAME	GROSS PAY	DAYS PAID	HOURS PAID
-----	----	-----	----	-----
555-012-1123-902	ANDERSON, SARAH B	\$384.54	0	29.00
	KELLY, JOHN F	\$1,014.65	0	85.00
555-012-4870-902	RIVERA, MARTHA M	\$1,253.22	0	132.00
	SCHULTZ, MICHELLE	\$195.97	0	18.00
	WEAVER, SUSAN D	\$501.12	0	46.00
TOTAL UNIT 012		\$3,339.50	0	310.00
555-014-3131-905	NGUYEN, TRAN	\$994.63	0	77.50
555-015-1139-902	CASTILLO, CARLA C	\$1,266.77	0	160.00
	SMITH, DERRICK D	\$987.78	0	128.00
555-015-1419-902	COFFEE, STEVEN R	\$1,290.46	0	160.00
	MORRISON, ARTHUR D	\$1,313.45	0	96.00
	TAYLOR, DONNA B	\$441.55	0	32.00
	WALTON, JONATHON	\$1,199.75	0	160.00
555-015-1441-902	MARTINEZ, JOSE	\$404.29	0	25.00
	YEE, STEVE	\$499.67	0	46.00
TOTAL UNIT 015		\$7,403.72	0	807.00

INT006

Report that identifies Intermittent employees reaching their 1500 hour maximum (worked 1200 hours or more) for the specified year.

PAGE 1

INTERMITTENT EMPLOYEES APPROACHING THEIR 1500 HOUR MAXIMUM
(1200 HOURS OR MORE) FROM 01/1999 TO 12/2000
DATA AS OF: 04/28/2000

NAME ----	POSITION NUMBER -----	SSN ---	TOTAL HOURS WORKED* -----
CRABTREE, SUSAN D	555-012-1123-902	xxx-xx-xxxx	1,231.00
FOGERTY, JOHN P	555-015-1441-902	xxx-xx-xxxx	1,455.00
FONG, ROBERT C	555-015-1419-902	xxx-xx-xxxx	1,345.00
GORDON, GEORGE	555-012-4870-902	xxx-xx-xxxx	1,313.00
MARTINEZ, PAUL R	555-015-1139-902	xxx-xx-xxxx	1,472.00
MORRISON, ARTHUR D	555-011-4870-902	xxx-xx-xxxx	1,203.00
YEE, STEVE	555-013-1441-902	xxx-xx-xxxx	1,389.00

*TOTAL HOURS WORKED DOES NOT INCLUDE:
HOURS WORKED AT ANOTHER AGENCY
BUT DOES INCLUDE HOURS:
THAT WERE PAYMENT TYPE 8 AND WAS TRANSFERRED TO
PAYMENT TYPE 6 DUE TO IDL. (I.E. PAYEARNID 8WK, 8WKN)

INT006A

Report that identifies Intermittent employees reaching their 1500 hour maximum (worked 1200 hours or more) or *2000 hour maximum (worked 1600 hours or more) for those employee's in bargaining unit 06. Based on the Leave Benefit Id MX' (Maximum Hours Worked).

PAGE 1

INTERMITTENT EMPLOYEES APPROACHING THEIR 1500/*2000 HOUR MAXIMUM
(1200/*1600 HOURS OR MORE)
DATA AS OF: 03/17/2006

NAME	POSITION NUMBER	SSN	CB ID	TOTAL HOURS WORKED
----	-----	---	--	-----
CRABTREE, SUSAN D	555-012-1123-902	xxx-xx-xxxx	R04	1,231.00
FOGERTY, JOHN P	555-015-1441-902	xxx-xx-xxxx	R04	1,455.00
FONG, ROBERT C	555-015-1419-902	xxx-xx-xxxx	R04	1,345.00
GORDON, GEORGE	555-012-4870-902	xxx-xx-xxxx	E	1,313.00
MARTINEZ, PAUL R	555-015-9662-902	xxx-xx-xxxx	*R06	1,745.00
MORRISON, ARTHUR D	555-011-4870-902	xxx-xx-xxxx	E	1,203.00
YEE, STEVE	555-013-9662-902	xxx-xx-xxxx	*R06	1,800.00

*THOSE EMPLOYEES WHO ARE IN BARGAINING UNIT 06

INT007

Report that identifies actual time worked (ATW) employees who have worked more than 150 days toward the 194 maximum.

PAGE 1

ACTUAL TIME WORKED (ATW) EMPLOYEES APPROACHING THE 194 DAY MAXIMUM
(MORE THAN 150 DAYS)

DATA AS OF: 04/14/2000

POSITION NUMBER	SSN	NAME	BALANCE
-----	---	----	-----
555-012-1123-902	xxx-xx-xxxx	RIVERA, MARTHA M	159.00
	xxx-xx-xxxx	VASQUEZ, PAUL R	165.00
555-012-4870-902	xxx-xx-xxxx	WEAVER, SUSAN D	155.00
	xxx-xx-xxxx	ANDERSON, SARAH B	169.00
	xxx-xx-xxxx	KELLY, JOHN F	192.00
	xxx-xx-xxxx	GOLDSMITH, JEFFREY	171.00
	xxx-xx-xxxx	SMITH, DERRICK D	178.00
555-015-1139-902	xxx-xx-xxxx	CASTILLO, CARLA C	179.00
	xxx-xx-xxxx	BANKS, MARTHA C	194.00
555-015-1419-902	xxx-xx-xxxx	CRABTREE, SUSAN D	170.00
	xxx-xx-xxxx	MARTINEZ, PAUL R	173.00
	xxx-xx-xxxx	GORDON, GEORGE	192.00
	xxx-xx-xxxx	FONG, ROBERT C	157.00
555-015-1441-902	xxx-xx-xxxx	FOGERTY, JOHN P	163.00
	xxx-xx-xxxx	MORRISON, ARTHUR D	191.00
	xxx-xx-xxxx	YEE, STEVE	178.00
	xxx-xx-xxxx	SLAUGHTER, EDWARD	189.00

INT008

Report that identifies Intermittent employees with probation reports due and indicates when the report is to be completed.

PAGE 1

INTERMITTENT EMPLOYEES ON PROBATION DATA AS OF: 04/14/2000

AGENCY	UNIT	HOURS UNTIL NEXT REPORT DUE	PROBATION REPORT DUE	SSN	NAME	HOURS WORKED TOWARDS PROB
-----	----	-----	-----	---	----	-----
998	221	116.00	1ST	xxx-xx-xxxx	JOHNSON, STANLEY B	364.00
				xxx-xx-xxxx	BLACK, JUSTIN W	364.00
				xxx-xx-xxxx	FISHER, DEBRA A	364.00
		8.00	2ND	xxx-xx-xxxx	SMITH, JOYCE F	632.00
	222	21.00	2ND	xxx-xx-xxxx	LEE, TOM L	619.00
		24.00	1ST	xxx-xx-xxxx	YOUNG, MICHAEL R	296.00
	225	.00	*	xxx-xx-xxxx	BLACK, JESSICA A	991.75
999	333	6.50	3RD	xxx-xx-xxxx	FOSTER, MARCUS D	953.50
		12.00	1ST	xxx-xx-xxxx	FLORES, PAUL	308.00
		24.25	1ST	xxx-xx-xxxx	TAYLOR, SHAWN S	295.50

*VERIFY DATA ON PIMS/CLAS

INT009

Report that identifies Intermittent employees who have reached the end of their 960 hours towards a SISA increase or the 1920 hours towards the MSA increase. Based on the Leave Benefit Id 'MA' or 'SA' (MSA/SISA). This report produces a Supervisor Certification of Salary Adjustment form.

SUPERVISOR CERTIFICATION OF SALARY ADJUSTMENT

SOCIAL SECURITY NUMBER	EMPLOYEE NAME	OLD SALARY	NEW SALARY	POSITION NUMBER
xxx-xx-xxxx	BROWNFIELD, KEVIN L			999-111-0835-905

FIRST MONTH HOURS WORKED	START DATE	CARRY-OVER HOURS	HOURS WORKED	EFFECTIVE DATE
		145.50	2065.50	03/02/2006

IN MY JUDGMENT, THE EMPLOYEE'S JOB PERFORMANCE

_____ MEETS THE LEVEL OF QUALITY AND QUANTITY EXPECTED BY THE AGENCY AT THIS STAGE OF AN EMPLOYEES EXPERIENCE IN THE POSITION AND THEREFORE I RECOMMEND THAT THE EMPLOYEE BE GRANTED A SALARY ADJUSTMENT

_____ DOES NOT MEET THE LEVEL OF QUALITY AND QUANTITY EXPECTED BY THE AGENCY AT THIS STAGE OF AN EMPLOYEES EXPERIENCE IN THE POSITION AND THEREFORE I RECOMMEND THAT THE EMPLOYEE NOT BE GRANTED A SALARY ADJUSTMENT AT THIS TIME. I HAVE SO INFORMED THE EMPLOYEE ON THIS DATE _____. SEE ATTACHED MEMO.

SIGNATURE OF SUPERVISOR

TITLE DATE

INT010

Report that identifies Intermittent employees who have reached the end of their 960 hours towards an alternate range of 6 months or 1920 hours towards the end of their 12 month alternate range. Based on the Leave Benefit Id 'AC' or 'AY' (Alt Range Change 960/1920). This report produces a Supervisor Certification of Salary Adjustment form.

SUPERVISOR CERTIFICATION OF SALARY ADJUSTMENT

EMPLOYEE'S NAME	SOCIAL SECURITY NO.
BLACK, JOHN L	xxx-xx-xxxx

EMPLOYEE'S POSITION NUMBER: 999-123-0916-901

CLASS TITLE	EVALUATION DATE	ALTERNATIVE RANGE
FSH & WLDLF TECH		A

IN MY JUDGMENT, THE EMPLOYEE'S JOB PERFORMANCE

_____ MEETS _____ DOES NOT MEET

THE LEVEL OF QUALITY AND QUANTITY EXPECTED BY THE AGENCY
AT THIS STAGE OF AN EMPLOYEE'S EXPERIENCE IN THE POSITION.

I THEREFORE RECOMMEND THAT THE EMPLOYEE:

BE MOVED FROM RANGE _____ TO RANGE _____.

NOT BE GRANTED A RANGE CHANGE AT THIS DATE _____.

I HAVE INFORMED THE EMPLOYEE ON THIS DATE _____.

COMMENTS:

SIGNATURE OF SUPERVISOR	TITLE	DATE

INT011

Report that lists Intermittent employees with their Anniversary Date, Range, Account Code, Leave benefits and balances, broken down by Agency and Unit.

PAGE 1

LISTING OF INTERMITTENT EMPLOYEES
 IN AGENCY: 555 Unit: 444
 DATA AS OF: 06/15/2007

CLASS	SRL	SSN	NAME	ANNI DATE	R N G	ACCT CODE	RET INFO	BEN ID	BENEFIT NAME	BALANCE
----	---	---	----	----	-	----	----	----	-----	-----
4870	902	xxx-xx-xxxx	ANDERSON, JUNE	NONE	D	TM	PST	AC	ARC-960	408.00
								MX	MAX HRS	408.00
								SL	SICK LV	29.00
								VA	VACATION	22.00
		xxx-xx-xxxx	CASTILLO, CARLA C	NONE	A	NM	NON	SA	SISA	146.00
								SL	SICK LV	8.00
								VA	VACATION	0.00
								WP	PH-VA WP	146.00
9662		xxx-xx-xxxx	KELLY, JOHN F	NONE	J	TM	PST	AC	ARC-960	320.00
								HC	HOL CR	16.00
								HD	H-D BEN	640.00
								SL	SICK LV	32.00
								SP	S POINTS	8.00
								VA	VACATION	52.00
		xxx-xx-xxxx	RIVERA, MARTHA M	MAX	K	3D	TEIR I	EX	EX HRS	26.50
								HC	HOL CR	48.00
								SL	SICK LV	8.00
								SP	S POINTS	134.00
								VA	VACATION	122.00
		xxx-xx-xxxx	WALTON, JONATHON	NONE	K	3D	TEIR I	FM	FMLA	48.00
								HC	HOL CR	47.75
								HI	HOL ITO	2.00
								SL	SICK LV	16.00
								SP	S POINTS	42.00
								VA	VACATION	86.50

AGENCY: 555 UNIT: 444

LEAVE001

Report that identifies employees on Direct Deposit with less than 40 hours combined balance of Annual Leave, Vacation, CTO, Personal Leave and Excess Hours AND a Sick Leave balance of less than 20 hours.

PAGE 1

EMPLOYEES ON DIRECT DEPOSIT
 THAT DO NOT MEET MINIMUM LEAVE BALANCE REQUIREMENTS
 DATA AS OF: 04/14/2000

UNIT	EMPLOYEE NAME	SSN	ANN LV	CTO	EX	PLP	SL	VAC	TOTAL
----	-----	---	---	---	--	---	--	---	-----
111	ANDERSON, JUNE	xxx-xx-xxxx	.00	.00	.00	.00	8.00	13.50	21.50
	BANKS, MARTHA C	xxx-xx-xxxx	.00	.00	.00	.25	.00	24.00	24.25
	CASTILLO, CARLA C	xxx-xx-xxxx	.00	.00	.00	.00	8.00	19.00	27.00
	GOLDSMITH, JEFFREY	xxx-xx-xxxx	.00	.00	.00	.00	17.00	4.00	21.00
113	KELLY, JOHN F	xxx-xx-xxxx	15.50	.00	.00	.00	.00	6.00	21.50
	RIVERA, MARTHA M	xxx-xx-xxxx	11.00	.00	.00	.00	.00	.00	11.00
	SCHULTZ, MICHELLE	xxx-xx-xxxx	.00	.00	.00	28.00	8.00	1.25	37.25
	SMITH, DERRICK D	xxx-xx-xxxx	.00	.00	.00	.00	.00	16.00	16.00
	VASQUEZ, PAUL R	xxx-xx-xxxx	.00	.00	2.50	.00	.00	2.00	4.50
112	WALTON, JONATHON	xxx-xx-xxxx	.00	.00	.00	.00	8.00	22.50	30.50

LEAVE004

Report that identifies employees projected to exceed the vacation or annual leave maximum based on an employee's CBID.

Note: This report cannot project changes in leave accrual rates. A footnote has been added to the report to alert the reader that accrual rate changes have not been included in the balances.

PAGE 1

ANTICIPATED OVERAGE OF VACATION OR ANNUAL LEAVE FOR JANUARY 1, 2001
 FOR AGENCY: 100 REPORTING UNIT: 340
 DATA AS OF: 09/22/2000

EMPLOYEE NAME	CBID	PROJ NEW BAL	OVER MAX	VAC/AL AMT EARNED	BENEFIT NAME
-----	----	----	----	-----	-----
CARLSON, JOHN P	R01	436.50	36.50	14.000	VACATION
COLLINS, DAVID B	R01	419.00	19.00	14.000	VACATION
FISHER, ROBERT L	M01	974.00	334.00	20.000	ANNUAL
HORTON, PEGGY N	R01	647.50	247.50	13.000	VACATION
JOHNSON, LORI D	S01	1049.00	409.00	20.000	ANNUAL
KNOLL, BARBARA A	R01	837.00	197.00	18.000	ANNUAL
MALONEY, HAROLD	R01	636.50	236.50	14.000	VACATION
MORENO, AKEMI	R04	492.25	92.25	14.000	VACATION
MULLIN, BERNARD C	S01	747.00	107.00	20.000	ANNUAL
RICHARDS, PAUL D	R01	407.00	7.00	12.000	VACATION
ROSE, GEORGE	R01	404.00	4.00	14.000	VACATION
SERRANO, JANE M	R01	491.50	91.50	14.000	VACATION
SLATER, LEWIS G	R01	498.00	98.00	14.000	VACATION
TRUMAN, HOMIN C	R01	576.50	176.50	12.000	VACATION
YANG, WING Y	R01	406.00	6.00	10.000	VACATION

NOTE: THIS DATA DOES NOT REFLECT VACATION OR ANNUAL LEAVE
 ACCRUAL RATE CHANGES FROM 08/2000 THROUGH 01/01/2001

LEAVE006

Report that identifies employees with a PLP balance and the cost to cashout.

PAGE 1

LIST OF EMPLOYEES WITH A PLP BALANCE AND THE PLP CASH OUT AMOUNT
IN AGENCY 444 AND UNIT 111
DATA AS OF: 04/28/2000

NAME	SSN	CBID	CLASS	HOURLY SALARY	PLP BALANCE	CASH OUT AMOUNT
----	---	----	-----	-----	-----	-----
ALLEN, ROBBIE C	xxx-xx-xxxx	S17	8101	\$29.13	152.00	\$4,427.76
DESUS, MACY M	xxx-xx-xxxx	R17	9699	\$26.42	136.00	\$3,593.12
HARPER, MARK H	xxx-xx-xxxx	R17	9699	\$26.42	112.00	\$2,959.04
JOHNSON, CRYSTAL A	xxx-xx-xxxx	R17	9699	\$26.42	112.00	\$2,959.04
STOLP, JONATHAN D	xxx-xx-xxxx	M18	8103	\$33.03	144.00	\$4,756.32
TOTAL FOR UNIT: 111					656.00	\$18,695.28

LEAVE06A

Report that identifies employees with a PL (PLP) and/or LD (2003 PLP) balances and the dollar equivalent to cash out.

LIST OF EMPLOYEES WITH A PLP BALANCE AND THE TOTAL PLP CASH OUT AMOUNT
IN AGENCY 444 AND UNIT 112
DATA AS OF: 05/22/2004

NAME	SSN	CBID	CLASS	HOURLY SALARY	PLP BALANCE	2003 PLP BALANCE	PLP CASH OUT AMOUNT	2003 PLP CASH OUT AMOUNT	TOTAL CASH OUT AMOUNT
----	---	----	-----	-----	-----	-----	-----	-----	-----
ADAMS, ROBBIE C	xxx-xx-xxxx	R01	4159	\$28.83	.00	56.00	\$.00	\$1,614.48	\$1,614.48
BROWN, MACY M	xxx-xx-xxxx	R04	1379	\$14.56	.00	37.50	\$.00	\$546.00	\$546.00
CARTER, MARK H	xxx-xx-xxxx	S01	4161	\$36.27	64.00	80.00	\$2,321.28	\$2,901.60	\$5,222.88
DANSON, CRYSTAL A	xxx-xx-xxxx	R01	4159	\$26.15	.00	56.00	\$.00	\$1,464.40	\$1,464.40
EVANS, JONATHAN D	xxx-xx-xxxx	R01	4159	\$24.90	.00	48.00	\$.00	\$1,195.20	\$1,195.20
TOTAL FOR UNIT: 120					64.00	277.50	\$2,321.28	\$7,721.68	\$10,042.96

LEAVE007

Report that identifies employees who have State Service data, but do not have leave benefit data. This report should be run periodically to determine if CLAS needs to be corrected.

PAGE 1

EMPLOYEES WHO HAVE STATE SERVICE, BUT DO NOT HAVE LEAVE BENEFIT DATA
DATA AS OF: 04/14/2000

POSITION NUMBER	NAME	SSN	STATE SERV MNTHS	TIMEBASE	APPT TENURE
-----	----	---	-----	-----	-----
500-100-8094-002	ALLEN, ROBBIE C	xxx-xx-xxxx	0	FT	P
500-100-8254-143	DESUS, MACY M	xxx-xx-xxxx	0	FT	T
500-101-7424-007	HARPER, HOLLY H	xxx-xx-xxxx	0	FT	P
500-200-7425-014	JOHNSON, CRYSTAL A	xxx-xx-xxxx	0	FT	P
500-200-7425-015	STOLP, JOHNNIE D	xxx-xx-xxxx	0	FT	P
500-202-7652-004	ONG, VAN E	xxx-xx-xxxx	0	004/005	L
500-222-8235-910	PALACIOS, WALLEY J	xxx-xx-xxxx	0	001/002	L
	PERRY, SALLY G	xxx-xx-xxxx	0	001/002	L
500-222-8253-910	BECKETT, MERCED F	xxx-xx-xxxx	0	INT	P
	MONGA, RON R	xxx-xx-xxxx	0	INT	P
	PASCHAL, DON M	xxx-xx-xxxx	0	INT	P
	SPELLMAN, ROBERT E	xxx-xx-xxxx	0	INT	P
500-224-8094-911	GUSTAFSON, SANDIE W	xxx-xx-xxxx	0	INT	P

LEAVE009

Report that provides the total number of CTO hours worked, and the total overtime hours worked and paid for a specified pay period.

PAGE 1

CTO EARNED AND OVERTIME HOURS WORKED/PAID FOR 08/2000 PAY PERIOD
DATA AS OF 09/22/2000

AGY	UNIT	CLASSIFICATION	CTO HOURS EARNED	OT HOURS WORKED	OT HOURS PAID
---	---	-----	-----	-----	-----
100	140	ACCOUNTANT TRAINEE	.000	5.00	\$138.90
		COMPUTER OPR SPR I	.000	4.50	\$150.12
		KEY DATA OPERATOR	.000	418.00	\$9,126.82
		KEY DATA SUPVR I	.000	23.25	\$567.80
		KEY DATA SUPVR II	.000	39.00	\$1,019.46
		MAIL MACH OP II	.000	43.50	\$923.96
		MAIL MACH SUP II	6.000	.00	\$.00
		MAILING MACH SUP I	3.000	7.50	\$193.35
		MICROFILM TECH I	.000	5.00	\$105.90
		MICROFILM TECH II	.000	2.00	\$45.56
		OF S SUP III (GEN)	.000	10.00	\$302.40
		OF SER SUP II (GN)	.000	9.00	\$239.22
		OFF ASST/GEN	12.750	.00	\$.00
		OFF ASST/TYP	.000	19.00	\$389.50
		OFF TECH (TYPING)	.000	17.00	\$403.92
*TOTAL PAYUNIT 140			21.750	602.75	\$13,606.91
550		ACCOUNT CLERK II	10.500	.00	\$.00
		ACCOUNTANT TRAINEE	4.500	22.00	\$527.56
		ACCT OF/SPL	56.250	52.50	\$1,658.51
		OFF ASST/TYP	.000	9.00	\$167.40
		PROG TECH	.000	139.50	\$2,788.15
		PROG TECH II	28.500	115.25	\$2,460.82
		PROG TECH III	84.000	107.75	\$2,743.06
		SR ACCT OF/SP	.000	7.00	\$254.10
		SR ACCT OF/SUP	.000	45.00	\$1,802.25
		STAFF SER AN (GEN)	.000	36.00	\$876.36
		STUDENT ASSISTANT	.000	5.25	\$73.40
		SUP PROG TECH I	.000	97.00	\$2,167.92
		SUP PROG TECH II	.000	4.00	\$106.32
		SUP PROG TECH III	81.750	.00	\$.00
*TOTAL PAYUNIT 550			265.500	640.25	\$15,625.85
TOTAL			287.250	1,243.00	\$29,232.76

LEAVE010

Report that provides the count of employees who used Sick Leave, and the total amount of Sick Leave hours used in a specified leave period. Report includes hours for leave benefits used in lieu of Sick Leave (Leave Transaction Codes: 04, 71).

PAGE 1

COUNT OF EMPLOYEES WHO USED SICK LEAVE AND
TOTAL SICK LEAVE HOURS USED FOR LEAVE PERIOD 08/2000
DATA AS OF: 09/22/2000

AGY	UNIT	CLASSIFICATION	COUNT OF EMPLOYEES	SICK LEAVE HOURS USED
---	----	-----	-----	-----
100	120	ACCOUNTANT TRAINEE	1	1.00
		ASO GOVRL PROG ANL	2	7.00
		ASO PERSONNEL ANLT	1	10.00
		PERSNL SVS SP I	1	3.50
		PERSNL SVS SP II	1	10.00
		SR ACCT OF/SP	1	1.00
		STAFF SVS MANGER I	1	40.00
		TOTAL FOR UNIT: 120	8	72.50
	140	ACCOUNT CLERK II	1	11.25
		ASO GOVRL PROG ANL	1	17.50
		C.E.A.	1	8.00
		COMPUTER OPERATOR	6	69.50
		COMPUTER OPR SPR I	1	8.00
		INFO SYS TC	2	3.00
		KEY DATA OPERATOR	3	67.00
		KEY DATA SUPVR I	2	32.00
		MAIL MACH OP II	4	70.00
		MICROFILM TECH II	1	8.00
		OFF ASST/GEN	4	60.00
		OFF ASST/TYP	1	16.00
		OFF TECH (TYPING)	1	14.50
		OFF TECHNICN (GEN)	1	21.00
		SR PR TRD SP/GEN	1	16.00
		STAFF SER AN (GEN)	1	4.00
		STUDENT ASSISTANT	1	11.00
		TOTAL FOR UNIT: 140	32	436.75
		TOTAL	40	509.25

NOTE: REPORT INCLUDES LEAVE BENEFITS USED IN LIEU OF SICK LEAVE.
PERSONAL HOLIDAY 'UNIT' USED IN LIEU OF SICK LEAVE BY:
- FULL TIME OR INTERMITTENT EMPLOYEE IS CONVERTED TO 8 HOURS.
- FRACTIONAL EMPLOYEE IS CONVERTED TO ITS FRACTIONAL HOURLY EQUIVALENT.

LEAVE011

Report that provides the number of hours worked and used, and the average number of employees for one calendar year for California Occupational Safety and Health Administration (CalOSHA). This report is similar to COM027, but uses the THLAS Leave file to subtract all hours used to get the final "TOTAL HOURS".

PAGE 1

CAL OSHA REPORT FOR 2000

PAY PERIOD	SSN COUNT	TOTAL HOURS EARNED/WORKED*	HOURS USED***	TOTAL HOURS
-----	-----	-----	-----	-----
2000/01	1,203	188,026.15	18,145.90	169,880.25
2000/02	1,199	195,170.90	17,556.10	177,614.80
2000/03	1,183	193,412.00	19,060.35	174,351.65
2000/04	1,187	184,607.95	23,290.15	161,317.80
2000/05	1,173	191,747.35	19,672.90	172,074.45
2000/06	1,168	193,616.75	22,806.67	170,810.08
2000/07	1,176	185,905.63	26,380.65	159,524.98
2000/08	1,174	195,114.55	23,336.60	171,777.95
2000/09	1,165	190,352.00	20,514.40	169,837.60
2000/10	1,170	188,563.30	19,699.45	168,863.85
2000/11	1,185	192,928.25	17,797.30	175,130.95
2000/12	1,187	193,909.60	33,970.28	159,939.32
TOTAL	14,170	2,293,354.43	262,230.75	2,031,123.68

** AVE_EMP 1,180

* HOURS WORKED FOR REGULAR PAY PLUS HOURS EARNED FOR
LEAVE BENEFIT IDS: CT, EH, EX, LD, MO, OC, PL, PV, OR VT.

** AVE_EMP IS THE AVERAGE NUMBER OF EMPLOYEES PAID
FROM 01/2000 THRU 12/2000 FOR REGULAR PAY ONLY.

*** ALL HOURS USED FOR ALL BENEFITS.

PERS001

Report that identifies employees approaching 20, 25 or 40 years of service within the next 12 months.

PAGE 1

EMPLOYEES APPROACHING 20, 25, OR 40 YEARS OF STATE SERVICE
 WITHIN 12 MONTHS
 DATA AS OF: 07/14/2000

AGY	UNIT	STATE SERVICE GROUP*	ST SVC MNS	EMPLOYEE NAME	CLASS TITLE
---	----	-----	---	-----	-----
998	111	20 YEARS	230	SMITH, DERRICK D	TRAINING OFFICER I
			232	CASTILLO, CARLA C	ASO GOVRL PROG ANL
			234	WALTON, JONATHON	PERSNL SVS SP II
			235	TAYLOR, DONNA B	STAFF SVS MANGER I
			239	MORRISON, ARTHUR D	C.E.A.
		25 YEARS	288	MARTINEZ, JOSE	STAFF SVS MANGER I
			291	YEE, STEVE	ASO GOVRL PROG ANL
			292	SCHULTZ, MICHELLE	SUP PROG TECH III
			295	WEAVER, SUSAN D	STF SVS MGR II/SUP
			297	ANDERSON, SARAH B	STAFF COUNSEL
			298	KELLY, JOHN F	OFF TECH (TYPING)
			300	GOLDSMITH, JEFFREY	KEY DATA SUPVR III
		40 YEARS	468	ADAMS, JAMES C	OF SER SUP II (GN)
				GARVEY, RONALD	ACCT ADMIN I/SUP
			473	HILL, JAVIER	EXEC A
			478	JONES, JUAN M	MAT & STORES SP

* 20 YEARS = 228 TO 240 MONTHS OF STATE SERVICE
 25 YEARS = 288 TO 300 MONTHS OF STATE SERVICE
 40 YEARS = 468 TO 480 MONTHS OF STATE SERVICE

PERS002

Report that reflects employees whose balance is 240 or greater and have not been cancelled from the VPLP participation.

PAGE 1

REPORT THAT REFLECTS EMPLOYEES WHOSE BALANCES IS 240 OR GREATER
AND HAVE NOT BEEN CANCELLED FROM THE VPLP PARTICIPATION
APPLIES TO RANK AND FILE EMPLOYEES
IN BAGAINING UNITS 1, 3, 4, 5, 10, 11, 14, 15, 17, AND 20

FOR AGENCY: 555 REPORTING UNIT: 444
DATA AS OF: 06/22/2007

NAME	CBID	BENBAL
----	----	-----
ADAMS, JAVIER	R01	244.00
ONG, SALLY G	R11	247.00
SPELLMAN, ROBERT E	R20	276.00

POS001

Report that lists all established or re-classed positions displaying Full Time Equivalency (FTE) and includes the name and time base of the employee occupying the position.

06/01/02

STATE OF CALIFORNIA-STATE CONTROLLER'S OFFICE-PPSD
 MANAGEMENT INFORMATION RETRIEVAL SYSTEM
 ESTABLISHED POSITIONS BY POSITION NUMBER
 DATA AS OF: MAY 31, 2002

PDV1101

001

FACILITY: STATE CONTROLLER'S OFFICE-PPSD

POSITION NUMBER	PSN FTE	EE FTE	PSN TERM DATE	EMPLOYEE TIMEBASE
001-010-1441-001 OFF ASST/GEN CLARK, DAWN M	1.00	1.00		FT
	PRIOR:	001-010-1728-001		
001-010-1728-001 EXEC A RECLASSSED	.00	.00	10/30/01	
	PRIOR:			
001-010-4610-001 NOT FOUND DAVIS, TIMOTHY M	1.00	1.00		FT
	PRIOR:			
001-010-5393-701 ASO GOVRL PROG ANL RECLASSSED	.00	.00	07/31/01	
	PRIOR:			
001-010-5393-702 ASO GOVRL PROG ANL VIRGA, MARK A	1.00	1.00		FT
	PRIOR:			
TOTAL FOR UNIT: 010	3.00	3.00		
001-120-5142-703 ASO PERSONNEL ANLT VACANT	1.00	.00		
	PRIOR:			
TOTAL FOR UNIT: 120	1.00	.00		
TOTAL	4.00	3.00		

POS002

Report that lists all established or re-classed positions displaying Full Time Equivalency (FTE) sorted by Class Title. The report includes the name and time base of the employee occupying the position.

06/01/02

STATE OF CALIFORNIA-STATE CONTROLLER'S OFFICE-PPSD
 MANAGEMENT INFORMATION RETRIEVAL SYSTEM
 ESTABLISHED POSITIONS BY CLASS TITLE AND POSITION
 DATA AS OF: MAY 31, 2002

PDV1102

001

FACILITY: STATE CONTROLLER'S OFFICE-PPSD

EMPLOYEE	PSN TERM DATE	EE FTE	PSN FTE	NO. PSNS

ASO GOVRL PROG ANL				
001-010-5393-701 RECLASSED	07/31/01	.00	.00	0
001-010-5393-702 VIRGA, MARK A		1.00	1.00	1
001-160-5393-704 FOSTER, DONNA G		1.00	1.00	1
001-160-5393-705 CLARK, BRENDA A		1.00	1.00	1
001-255-5393-700 WILLIAMS, GREGG M		1.00	1.00	1
TOTAL FOR: ASO GOVRL PROG ANL		4.00	4.00	4
ASO PERSONNEL ANLT				
001-120-5142-703 VACANT		.00	1.00	1
TOTAL FOR: ASO PERSONNEL ANLT		.00	1.00	1
EXEC A				
001-010-1728-001 RECLASSED	10/30/01	.00	.00	0
TOTAL FOR: EXEC A		.00	.00	0
NOT FOUND				
001-010-4610-001 DAVIS, TIMOTHY M		1.00	1.00	1
TOTAL FOR: NOT FOUND		1.00	1.00	1
TOTAL		5.00	6.00	6

POS003

Report that provides a summary of established filled/vacant positions sorted by Class Title.

06/01/02

STATE OF CALIFORNIA-STATE CONTROLLER'S OFFICE-PPSD
 MANAGEMENT INFORMATION RETRIEVAL SYSTEM
 FILLED/VACANT POSITION SUMMARY BY FACILITY AND CLASS TITLE
 DATA AS OF: MAY 31, 2002

PDV1103

001

FACILITY: STATE CONTROLLER'S OFFICE-PPSD

CLASS TITLE -----	TYPE OF POS -----	CLASS CODE -----	TOTAL AUTHORIZED -----	EST PSNS AUTH -----	EST PSNS FILLED -----	EST PSNS VACANT -----
A DIR EXT AFF	4	0375	1.00	1	1	0
ACCOUNTANT TRAINEE		4179	1.00	1	1	0
ACCOUNTING TECH		1741	2.00	2	2	0
ACCT I/SP		4177	2.00	2	1	1
ACCT OF/SPL		4546	2.00	2	1	1
ASO ADM ANLY AC SY		5304	1.00	1	1	0
ASO GOVRL PROG ANL		5393	2.00	2	2	0
ASO PERSONNEL ANLT		5142	3.00	3	2	1
BUS SVS O I/SUP		4722	1.00	1	1	0
BUSNS SVS A SP		4707	2.00	2	2	0
C.E.A.		7500	1.00	1	1	0
CH DEP DIR	4	0630	1.00	1	1	0
NOT FOUND	4	4610	1.00	1	1	0
OF SER SUP I (TYP)		1148	1.00	1	1	0
OFF ASST/GEN		1441	1.00	1	1	0
PERSNL SP		1303	1.00	1	0	1
SP A	4	0628	1.00	1	1	0
SR ACCT OF/SUP		4569	1.00	1	1	0
STAFF SVS MANGER I		4800	3.00	3	3	0
STF SVS MGR II/SUP		4801	1.00	1	1	0
STRATEGC PLN&C ADV	4	4623	1.00	1	1	0
TOTAL			30.00	30	26	4

POS004

Report that provides a department summary of established filled/vacant positions sorted by Class Code.

06/01/02

STATE OF CALIFORNIA-STATE CONTROLLER'S OFFICE-PPSD
 MANAGEMENT INFORMATION RETRIEVAL SYSTEM
 DEPARTMENT SUMMARY FILLED/VACANT POSITIONS BY CLASS CODE
 DATA AS OF: MAY 31, 2002

PDV1104

001

DEPARTMENT: STATE CONTROLLER'S OFFICE-PPSD

CLASS CODE	CLASS TITLE	TYPE OF POS	TOTAL AUTHORIZED	EST PSNS AUTH	EST PSNS FILLED	EST PSNS VACANT
-----	-----	----	-----	----	-----	-----
0375	A DIR EXT AFF	4	1.00	1	1	0
0628	SP A	4	1.00	1	1	0
0630	CH DEP DIR	4	1.00	1	1	0
1138	OFF TECHNICN (GEN)		1.00	1	1	0
1148	OF SER SUP I (TYP)		1.00	1	1	0
1317	SR PERSONL SP		1.00	1	1	0
1441	OFF ASST/GEN		1.00	1	1	0
1741	ACCOUNTING TECH		2.00	2	2	0
4177	ACCT I/SP		2.00	2	1	1
4179	ACCOUNTANT TRAINEE		1.00	1	1	0
4546	ACCT OF/SPL		2.00	2	1	1
4569	SR ACCT OF/SUP		1.00	1	1	0
4610	NOT FOUND	4	1.00	1	1	0
4623	STRATEGC PLN&C ADV	4	1.00	1	1	0
4707	BUSNS SVS A SP		2.00	2	2	0
4722	BUS SVS O I/SUP		1.00	1	1	0
4800	STAFF SVS MANGER I		3.00	3	2	1
4801	STF SVS MGR II/SUP		1.00	1	1	0
5142	ASO PERSONNEL ANLT		3.00	3	2	1
5304	ASO ADM ANLY AC SY		1.00	1	1	0
5393	ASO GOVRL PROG ANL		1.00	1	1	0
7500	C.E.A.		1.00	1	1	0
TOTAL			30.00	30	26	4

POS005

Report that displays positions where expenditures have not been charged to the listed positions for 6 consecutive months or more in a fiscal year.

06/01/02

STATE OF CALIFORNIA-STATE CONTROLLER'S OFFICE-PPSD
MANAGEMENT INFORMATION RETRIEVAL SYSTEM
POTENTIAL ABOLISH - POSITIONS WITH NO EXPENDITURES
FOR 6 OR MORE CONSECUTIVE MONTHS
EXCLUDING EXEMPT 4 AND STATUTORY 7
BY FACILITY AND POSITION NUMBER
DATA AS OF: MAY 31, 2002

PDV1105

001

FACILITY: STATE CONTROLLER'S OFFICE-PPSD

POSITION NUMBER AGY-UNT-CLAS-SER	CLASS TITLE	AUTHORIZED FTE	PSN TERM DATE	1ST MONTH WITH NO EXPENDITURE
-------------------------------------	-------------	-------------------	------------------	----------------------------------

001-150-1728-001	EXEC A	1.00		07/2001
		PRIOR:		
001-232-9927-001	PROG TECH	1.00		07/2001
		PRIOR:		
001-252-9927-004	PROG TECH	1.00		11/2001
		PRIOR:	001-252-9928-006	
001-260-9928-001	PROG TECH II	1.00		11/2001
		PRIOR:	001-231-9928-002	
001-270-9247-010	VICTIM COMP SP	.00	12/02/01	07/2001
		PRIOR:	001-271-9247-003	
001-270-9247-015	VICTIM COMP SP	1.00		07/2001
		PRIOR:	001-271-9247-009	
001-270-9247-023	VICTIM COMP SP	.00	12/02/01	07/2001
		PRIOR:	001-272-9247-008	
001-272-9247-001	VICTIM COMP SP	1.00		07/2001
		PRIOR:		
001-320-4160-001	STAFF MGMT AUDITOR	.00	02/28/02	07/2001
		PRIOR:		
001-411-1582-002	ST PROG ANLYST/SUP	.00	02/10/02	09/2001
		PRIOR:		

TOTAL

6.00